

Personal Information

First Name (Legal): _____ First Name (Preferred): _____ Last Name: _____
 Florida Address: _____ City: _____ Zip: _____
 Community You Live (e.g. Pioneer Creek, Buttonwood Bay, Tanglewood): _____
 Northern Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Email address: _____ SFSC GID (staff use only): _____
 Date of Birth: _____ Gender: M ___ F ___

Must Circle	Circle age bracket based on age you turn in 2019: 50-54 55-59 60-64 65-69 70-74 75-79 80-84 85-89 90+	Must Circle	Circle Shirt Size: M L XL 2XL 3XL
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Payment Information and Registration Instructions

Option 1—Complete registration form and visit your nearest SFSC campus to register and make payment.

Option 2—Complete registration form and send along with a check for total amount.

Checks are payable to South Florida State College—Please send registration form and check to:

SOUTH FLORIDA STATE COLLEGE, CASHIER SERVICES, 600 West College Drive, Avon Park, FL 33825

Option 3—Call to register and make payment (SFSC accepts Master Card, Visa, and Discover).

Mail completed form to address above attention Community Education Department. Registration: (863)784-7405 or 453-6661.

\$30 - Competing in more than one event (CRN 20387) | \$20 Competing in only one event (CRN 20267)

Lunch is served with all events except track and field, swimming, bowling and cycling. **Arrive 30 minutes prior to**

Confirmation of registration and additional details will be sent via email one week prior to each event.

CHECK ALL THAT APPLY
Place a large X in the box left of the event chosen.
Registration deadline for the following events is Jan. 18, 2019

Sat., Feb. 2 8 a.m. - 2 p.m.	Golf Handicap _____ Sebring Municipal Golf Course ★
Tues., Feb. 5 9:30 a.m. - 1:30 p.m.	Euchre Tanglewood, Sebring
Wed., Feb. 6 9 a.m. - 4 p.m.	Shuffleboard Sebring Rec. Center a.m. Singles: Yes ___ No ___ p.m. Doubles Partner _____
Thurs., Feb. 7 9:30 a.m. - 4 p.m.	Table Tennis Sebring Rec. Center a.m. Singles: Yes ___ No ___ p.m. Doubles Partner _____ Mixed Doubles Partner _____
Fri., Feb. 8 9 a.m. - 4 p.m.	Horseshoes % _____ Lee Palmer Courts, Sebring
Sat., Feb. 9 8 a.m. - 5:30 p.m.	Pickleball Doubles Tanglewood, Sebring Partner _____
Sun., Feb. 10 8 a.m. - 5:30 p.m.	Pickleball Mixed Doubles Tanglewood, Sebring Partner _____

Registration deadline for the following events is Jan. 31, 2019

Mon., Feb. 11 9 a.m. - 12 p.m.	Bowling Singles Bowl Of Fun, Wauchula ★
Fri., Feb. 15 9:30 a.m. - 3 p.m.	Mah Jongg Tropical Harbor, Lake Placid
Sat., Feb. 16 9 a.m. - 12 p.m.	Cycling Sun n Lake Recumbent Yes ___ No ___ 5k: Yes ___ No ___ 10k: Yes ___ No ___
Mon., Feb. 18 8:30 a.m. - 12 p.m.	Bowling Doubles Bowl Of Fun, Wauchula ★ Doubles Partner _____ Mixed Doubles Partner _____

★ Additional fee paid to venue

CHECK ALL THAT APPLY
Place a large X in the box left of the event chosen.
Registration deadline for the following events is Feb. 7, 2019

Thurs., Feb. 21 9:30 a.m. - 3 p.m.	Bridge Tanglewood, Sebring
Sat., Feb. 23 5K 8 a.m. Other events 9 a.m. - 2 p.m.	Track and Field Avon Park High School <u>Maximum of 6 events</u> 50 ___ 100 ___ 200 ___ 400 ___ 800 ___ 1500 ___ 5k ___ Discus ___ Shot Put ___ Long Jump ___ High Jump ___
Mon., Feb. 25 12:00 p.m. - 4 p.m.	Swimming Highlands County YMCA, Sebring <u>Maximum of 6 events</u> Backstroke 50 ___ 100 ___ 200 ___ Breaststroke 50 ___ 100 ___ 200 ___ Butterfly 50 ___ 100 ___ 200 ___ Freestyle 50 ___ 100 ___ 200 ___ 500 ___ Individual Medley 100 ___ 200 ___
Tues., Feb. 26 9 a.m.	Tennis Singles Thakkar Tennis Center, Sebring
Wed., Feb. 27 11 a.m.	Tennis Mixed Doubles Thakkar Tennis Center, Sebring Partner _____
Thurs., Feb. 28 9 a.m.	Tennis Doubles Thakkar Tennis Center, Sebring Partner _____



For more information, call
863.784.7032 or email
communityeducation
@southflorida.edu

WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in the Heartland Senior Games program, and it's related events and activities in any way:

I, THE UNDERSIGNED ACKNOWLEDGE, UNDERSTAND, DECLARE, APPRECIATE AND AGREE THAT THERE IS SIGNIFICANT RISK OF INJURY that could result from my participation in the Heartland Senior Games program and its related activities, including the potential for disability, permanent paralysis, death, loss or damage to myself or my property, other consequences and other risks, both known and unknown or not reasonably foreseeable.

I, UNDERSTANDING THE ABOVE, KNOWINGLY AND FREELY ASSUME ALL RESPONSIBILITY AND RISKS, which might result not only from my own actions, inaction or negligence but also the actions, inaction or negligence of the Heartland Senior Games program or others, the rules of play, the conditions of the premises or of any equipment used, or travel en route to and from the events and activities.

I AGREE TO COMPLY WITH THE STATED TERMS AND CONDITIONS FOR PARTICIPATION. If, however, I observe any hazard or unsafe facility or equipment prior to or during my participation, I will immediately bring such to the attention of the personnel of the Heartland Senior Games program and either decline to participate or ASSUME THE RISK of my participation.

I, for myself, and for my executors, administrators, personal representatives, assigns, heirs, and next of kin, DO HEREBY RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, INDEMNIFY AND COVENANT NOT TO SUE the Heartland Senior Games program, South Florida State College, it's employees, volunteers, officers, directors, officials, sponsors, sponsoring agencies, advertisers, promoters, any owner or lessee of the premises used, other participants, affiliated businesses, organizations, municipalities, governmental agencies, the Florida Senior Games State Championships, Florida Sports- Florida Sports Foundation, a division of Enterprise Florida, Inc. and all respective personnel and any other individuals or organizations affiliated with the Heartland Senior Games program, FROM ANY AND ALL DEBTS, OBLIGATIONS, AND LIABILITY FOR INJURY, DISABILITY, DEATH LOSS, OR DAMAGE TO PERSON OR PROPERTY, OR ANY OTHER CONSEQUENCES TO THE FULLEST EXTENT PERMITTED BY LAW.

I CONSENT TO EMERGENCY MEDICAL TREATMENT as may be deemed appropriate by medical personnel or personnel associated with the Heartland Senior Games program.

I AGREE THAT I WILL ALLOW MY photograph, picture or likeness and/or voice to appear in any official documentary, promotion (including any and all advertisements), television, radio, or film coverage without compensation.

I, THE UNDERSIGNED ACKNOWLEDGE THAT I HAVE READ THIS WAIVER AND RELEASE OF LIABILITY AGREEMENT, FULLY UNDERSTANDING ITS TERMS, THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HEREBY SIGN THIS AGREEMENT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant Name (please print) _____

Participant Signature _____

Phone: _____ Alternate Phone: _____

Gold Sponsors:

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Newsom Eye
Edward Jones / Alan Holmes

Silver Sponsors:

AdventHealth
Alan Jay Automotive Network
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